

UNITED STATES BANKRUPTCY COURT  
DISTRICT OF NEW JERSEY

Page 1 of 12

Caption in Compliance with D.N.J. LBR 9004-1(b)  
[Enter your name, address and telephone number]MAUREEN BENSADIGH  
27 SCHAEFER RD  
ALPINE, NJ 07620U.S. BANKRUPTCY COURT  
FILED  
NEWARK, NJ

2017 APR 28 A 10:08

JEANNE A. NAUGHTON

BY D. C. M.  
DEPUTY CLERKIn Re:  
[Enter the debtor's name(s)]Case No.: 17-14644  
[Enter the case number]  
Chapter: 7  
[Enter the chapter; example: 13]  
Hearing Date: \_\_\_\_\_  
[Enter the hearing date]  
Judge: VFP  
[Enter the Judge's last name]

## NOTICE OF MOTION TO

[Enter the relief sought] RE INSTATE CHAPTER 7 CASE # 17-14644[Enter your name] M. Bensadigh has filed papers with the court to [Enter the relief sought] \_\_\_\_\_**YOUR RIGHTS MAY BE AFFECTED. You should read these papers carefully and discuss them with your attorney, if you have one in this bankruptcy case. (If you do not have an attorney, you may wish to consult one).**

If you do not want the court to grant this motion, or if you want the court to consider your views, you or your attorney must file with the clerk at the address listed below, a written response explaining your position no later than 7 days prior to the hearing date.

Hearing Date: \_\_\_\_\_  
[Enter the date of the hearing]Hearing Time: \_\_\_\_\_  
[Enter the time of the hearing]Hearing Location: \_\_\_\_\_  
[Enter the location of the hearing]Courtroom Number: \_\_\_\_\_  
[Enter the courtroom number]

If you mail your response to the clerk for filing, you must mail it early enough so the court will receive it on or before 7 days prior to the hearing date.

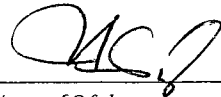
You must also mail a copy of your response to:

*[Enter the trustee's name and address]*

*[Enter the name and address of all other parties who will be affected by this motion]*

If you, or your attorney, do not take the steps outlined above, the court may decide that you do not oppose the relief sought in the motion and may enter an order granting that relief.

Date: 4/28/17  
*[Enter the date this document is signed]*

  
Signature *[Of the party seeking relief]*

UNITED STATES BANKRUPTCY COURT  
DISTRICT OF NEW JERSEY

Caption in Compliance with D.N.J. LBR 9004-1(b)  
[Enter your name, address and telephone number]

MAUREEN BEN SADIGHT

U.S. BANKRUPTCY COURT  
FILED  
NEWARK, N.J.

2017 APR 28 A 10:09

JEANNE A. NAUGHTON

BY D. C. [Signature]  
DEPUTY CLERK

In Re:  
[Enter the debtor's name(s)]

Case No.: 17-14644  
[Enter the case number]

Chapter: 7  
[Enter the chapter]

Hearing Date: \_\_\_\_\_  
[Enter the hearing date]

Judge: \_\_\_\_\_  
[Enter the judge's last name]

CERTIFICATION OF MAUREEN BEN SADIGHT  
[Enter the name of the person that has personal knowledge of the facts set forth below]

I, [Enter the name of the person that has personal knowledge of the facts set forth below]  
\_\_\_\_\_, [Enter their relationship to the case. For  
example: debtor, creditor] \_\_\_\_\_ in the above captioned case, submits this  
Certification in support of the Motion for [Enter title of motion] REINSTATE CHAPTER 7  
17-14644 filed by me on [Enter the date the motion was  
filed] 4/28/17.

1. [Enter the facts on which you believe such relief should be granted. Each fact must be set forth in a  
separate numbered paragraph.] MISSING DOCUMENTS ARE ATTACHED.  
1. STATEMENT OF FINANCIAL AFFAIRS 2. DECLARATION OF INDIVIDUAL  
3. SUMMARY OF ASSETS/LIABILITIES 4. STATEMENT CURRENT MONTHLY  
INCOME.

2. [Enter the facts on which you believe such relief should be granted. Each fact must be set forth in a separate numbered paragraph.] \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

3. [Enter the facts on which you believe such relief should be granted. Each fact must be set forth in a separate numbered paragraph.] \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

4. [Enter the facts on which you believe such relief should be granted. Each fact must be set forth in a separate numbered paragraph.] \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

5. [Enter the facts on which you believe such relief should be granted. Each fact must be set forth in a separate numbered paragraph.] \_\_\_\_\_


\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I certify under penalty of perjury that the above is true.

Date: 4/28/17  
[Enter the date this document is signed]

  
\_\_\_\_\_  
Signature  
[Of the party with actual knowledge of the facts set forth above]

UNITED STATES BANKRUPTCY COURT  
DISTRICT OF NEW JERSEYCaption in Compliance with D.N.J. LBR 9004-1(b)  
[Enter your name, address and telephone number]MAUREEN BENSADIGH  
27 SCHAFER RD  
ALPINE NJ 07620U.S. BANKRUPTCY COURT  
FILED  
NEWARK, NJ


2017 APR 28 A 10:09

JEANNE A. NAUGHTON

BY:   
DEPUTY CLERKIn Re:  
[Enter the debtor's name(s)]Case No.: 17-14644  
[Enter the case number]Chapter: 7  
[Enter the chapter; example: 13]Hearing Date: \_\_\_\_\_  
[Enter the hearing date]Judge: \_\_\_\_\_  
[Enter the Judge's last name]

## STATEMENT AS TO WHY NO BRIEF IS NECESSARY

In accordance with D.N.J. LBR 9013-1(a)(3), it is respectfully submitted that no brief is necessary in the court's consideration of this motion, as it does not involve complex issues of law.

Date: 4/28/17  
[Enter date this document is signed]
  
Signature [Of party seeking relief]

UNITED STATES BANKRUPTCY COURT  
DISTRICT OF NEW JERSEY

Caption in Compliance with D.N.J. LBR 9004-1(b)  
[Enter your name, address and phone number]

MAUREEN BEN SADIQ#

In Re:  
[Enter the debtor's name(s)]

Case No.: 17-14644  
[Enter the case number]

Chapter: 7  
[Enter the case number]

Hearing Date: \_\_\_\_\_  
[Enter the hearing date]

Judge: \_\_\_\_\_  
[Enter the Judge's last name]

**ORDER GRANTING**

\_\_\_\_\_  
[Enter the relief sought]

The relief set forth on the following pages, numbered two (2) through [enter the number of the last page of this Order] \_\_\_\_\_ is **ORDERED**.

[Leave the rest of this page blank]

The Court having reviewed the movant's *[Enter the title of the motion]* \_\_\_\_\_  
\_\_\_\_\_, and any related responses or objections, it is  
hereby

ORDERED that:

1. *[Enter the relief sought or ordered by the Court at the hearing. Each item of relief must be set forth in a separate numbered paragraph]* \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. *[Enter the relief sought or ordered by the Court at the hearing. Each item of relief must be set forth in a separate numbered paragraph]* \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. *[Enter the relief sought or ordered by the Court at the hearing. Each item of relief must be set forth in a separate numbered paragraph]* \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. *[Enter the relief sought or ordered by the Court at the hearing. Each item of relief must be set forth in a separate numbered paragraph]* \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

☐ Statement as to Why No Brief is Necessary

☐ Proposed Order Granting Motion *[Enter title of motion]* \_\_\_\_\_

☐ Other *[Enter title of document]* \_\_\_\_\_

3. I certify under penalty of perjury that the above documents were sent using the mode of service indicated.

Date: \_\_\_\_\_  
*[Enter the date you signed this document]*

\_\_\_\_\_  
*Signature [Of the person who served the documents]*



UNITED STATES BANKRUPTCY COURT DISTRICT OF NEW JERSEY	
Caption in Compliance with D.N.J. LBR 9004-1(b) [Enter your name, address and phone number]	
MAUREEN BENSADISH 27 SCHAFER RD ALPINE NJ 07620	
In Re: [Enter the debtor's name(s)]	

U.S. BANKRUPTCY COURT  
FILED  
NEWARK, NJ

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JEANNE A. NAUGHTON

BY: [Signature]  
DEPUTY CLERK

Case No.: 17-14644  
[Enter the case number]

Chapter: 7  
[Enter the chapter of the case]

Hearing Date: \_\_\_\_\_  
[Enter the hearing date]

Judge: \_\_\_\_\_  
[Enter the Judge's last name]

### CERTIFICATION OF SERVICE

1. I, \_\_\_\_\_:

☐ represent \_\_\_\_\_ in this matter.

☐ am the secretary/paralegal for \_\_\_\_\_, who represents  
\_\_\_\_\_ in this matter.

☒ am the MAUREEN BENSADISH in this case and am representing myself.

2. On [Enter the date you served the documents] 4/28/17, I sent a copy of the  
following pleadings and/or documents to the parties listed in the chart below.

[Place a check next to each document you served]

☐ Notice of Motion [Enter title of motion] \_\_\_\_\_

☐ Certification in Support of Motion [Enter title of motion] \_\_\_\_\_

Name and Address of Party Served	Relationship of Party to the Case	Mode of Service
<p>[Enter the name and address of the party you served]</p> <p>PNC BANK 1 PNC PLAZA 249 5th AVE Pittsburg PA 15222</p>	<p>[Enter the party's relationship to the case]</p> <p>CREDITOR</p>	<p><input type="checkbox"/> Hand-delivered</p> <p><input checked="" type="checkbox"/> Regular mail</p> <p><input type="checkbox"/> Certified mail/Return receipt requested</p> <p><input type="checkbox"/> Other _____</p> <p>(As authorized by the Court or rule. Cite the rule if applicable.)</p>
<p>[Enter the name and address of the party you served]</p> <p>EZ PASS</p>	<p>[Enter the party's relationship to the case]</p> <p>CREDITOR</p>	<p><input type="checkbox"/> Hand-delivered</p> <p><input checked="" type="checkbox"/> Regular mail</p> <p><input type="checkbox"/> Certified mail/Return receipt requested</p> <p><input type="checkbox"/> Other _____</p> <p>(As authorized by the Court or rule. Cite the rule if applicable.)</p>
<p>[Enter the name and address of the party you served]</p> <p>SPRINT 6200 SPRINT PKWY OVERLAND PARK KS 66251</p>	<p>[Enter the party's relationship to the case]</p> <p>CREDITOR</p>	<p><input type="checkbox"/> Hand-delivered</p> <p><input checked="" type="checkbox"/> Regular mail</p> <p><input type="checkbox"/> Certified mail/Return receipt requested</p> <p><input type="checkbox"/> Other _____</p> <p>(As authorized by the Court or rule. Cite the rule if applicable.)</p>
<p>[Enter the name and address of the party you served]</p> <p>OPITMA 10 E 53rd ST NEW YORK NY 10022</p>	<p>[Enter the party's relationship to the case]</p> <p>CREDITOR</p>	<p><input type="checkbox"/> Hand-delivered</p> <p><input checked="" type="checkbox"/> Regular mail</p> <p><input type="checkbox"/> Certified mail/ Return receipt requested</p> <p><input type="checkbox"/> Other _____</p> <p>(As authorized by the Court or rule. Cite the rule if applicable.)</p>
<p>[Enter the name and address of the party you served]</p> <p>VISION CABLE 1111 STEWART AVE BETHPAGE NY</p>	<p>[Enter the party's relationship to the case]</p> <p>CREDITOR</p>	<p><input type="checkbox"/> Hand-delivered</p> <p><input checked="" type="checkbox"/> Regular mail</p> <p><input type="checkbox"/> Certified mail/ Return receipt requested</p> <p><input type="checkbox"/> Other _____</p> <p>(As authorized by the Court or rule. Cite the rule if applicable.)</p>

Name and Address of Party Served	Relationship of Party to the Case	Mode of Service
<p><i>[Enter the name and address of the party you served]</i></p> <p>AT+T 208 S AKARD ST DALLAS TX</p>	<p><i>[Enter the party's relationship to the case]</i></p> <p>CREDITOR</p>	<p><input type="checkbox"/> Hand-delivered</p> <p><input checked="" type="checkbox"/> Regular mail</p> <p><input type="checkbox"/> Certified mail/ Return receipt requested</p> <p><input type="checkbox"/> Other _____</p> <p>(As authorized by the Court or rule. Cite the rule if applicable.)</p>
<p><i>[Enter the name and address of the party you served]</i></p> <p>CALIBER Bank Box 24330 Oklahoma City OK 73124</p>	<p><i>[Enter the party's relationship to the case]</i></p> <p>CREDITOR</p>	<p><input type="checkbox"/> Hand-delivered</p> <p><input checked="" type="checkbox"/> Regular mail</p> <p><input type="checkbox"/> Certified mail/ Return receipt requested</p> <p><input type="checkbox"/> Other _____</p> <p>(As authorized by the Court or rule. Cite the rule if applicable.)</p>
<p><i>[Enter the name and address of the party you served]</i></p> <p>SANTADERS Bank Box 961245 Fort Worth TX</p>	<p><i>[Enter the party's relationship to the case]</i></p>	<p><input type="checkbox"/> Hand-delivered</p> <p><input type="checkbox"/> Regular mail</p> <p><input type="checkbox"/> Certified mail/ Return receipt requested</p> <p><input type="checkbox"/> Other _____</p> <p>(As authorized by the Court or rule. Cite the rule if applicable.)</p>
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Name and Address of Party Served	Relationship of Party to the Case	Mode of Service
<p><i>[Enter the name and address of the party you served]</i></p> <p>PS&amp;G 214 HUDSON AVE HACKENSACK, NJ 07601</p>	<p><i>[Enter the party's relationship to the case]</i></p> <p>CREDITOR</p>	<p><input type="checkbox"/> Hand-delivered</p> <p><input checked="" type="checkbox"/> Regular mail</p> <p><input type="checkbox"/> Certified mail/ Return receipt requested</p> <p><input type="checkbox"/> Other _____</p> <p>(As authorized by the court or rule. Cite the rule if applicable.)</p>
<p><i>[Enter the name and address of the party you served]</i></p> <p>Rockland electric Box 1009 Spring Valley NY 10977</p>	<p><i>[Enter the party's relationship to the case]</i></p> <p>CREDITOR</p>	<p><input type="checkbox"/> Hand-delivered</p> <p><input checked="" type="checkbox"/> Regular mail</p> <p><input type="checkbox"/> Certified mail/ Return receipt requested</p> <p><input type="checkbox"/> Other _____</p> <p>(As authorized by the court or rule. Cite the rule if applicable.)</p>
<p><i>[Enter the name and address of the party you served]</i></p> <p>SUEZ Box 371804 Pittsburg PA 15250</p>	<p><i>[Enter the party's relationship to the case]</i></p> <p>CREDITOR</p>	<p><input type="checkbox"/> Hand-delivered</p> <p><input checked="" type="checkbox"/> Regular mail</p> <p><input type="checkbox"/> Certified mail/ Return receipt requested</p> <p><input type="checkbox"/> Other _____</p> <p>(As authorized by the court or rule. Cite the rule if applicable.)</p>
<p><i>[Enter the name and address of the party you served]</i></p> <p>capitalONE</p>	<p><i>[Enter the party's relationship to the case]</i></p> <p>CREDITOR</p>	<p><input type="checkbox"/> Hand-delivered</p> <p><input checked="" type="checkbox"/> Regular mail</p> <p><input type="checkbox"/> Certified mail/ Return receipt requested</p> <p><input type="checkbox"/> Other _____</p> <p>(As authorized by the court or rule. Cite the rule if applicable.)</p>
<p><i>[Enter the name and address of the party you served]</i></p> <p>JCC 411 EAST CLINTON Trenton NJ 07670</p>	<p><i>[Enter the party's relationship to the case]</i></p> <p>CREDITOR</p>	<p><input type="checkbox"/> Hand-delivered</p> <p><input checked="" type="checkbox"/> Regular mail</p> <p><input type="checkbox"/> Certified mail/ Return receipt requested</p> <p><input type="checkbox"/> Other _____</p> <p>(As authorized by the court or rule. Cite the rule if applicable.)</p>